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Weekly Bulletin

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Waging War on Pneumonia.

Detroit and Pittsburgh are engaged actively in combatting pneumonia. Detroit supplies laboratory typing service to physicians in order that, if required, the Type I pneumonia serum may be given, thus reducing the fatality rate. The Detroit Health Department also issues to the general public a few pertinent suggestions for the prevention of pneumonia, which are printed here.

Pittsburgh quarantines all cases of pneumonia, acting upon the theory that if the pneumonias are infectious diseases, isolation and quarantine should produce as beneficial results in the lowering of the morbidity and mortality rate of this group of diseases as had been done by house quarantine in other infectious diseases. In 1925, when quarantine measures against the disease became effective, there was a reduction of 607 pneumonia deaths, or about 26.5 per cent, as compared with the year 1923, the last year of no quarantine. Of the plan as used at present, Dr. C. J. Vaux, director of the Department of Public Health, writes as follows:

"In Pittsburgh, the regulation covering reports of cases of pneumonia was made all inclusive in order to avoid any loophole for failure to report a case. The regulation follows: Pneumonias (all forms) are reportable diseases in the city of Pittsburgh; specify (*a*) lobar pneumonia; (*b*) bronchopneumonia; (*c*) pneumonia complicating influenza; (*d*) pneumonia complicating other communicable diseases; (*e*) all other pneumonias, as traumatic, anesthetic, senile, etc.; specify whether lobar pneumonia or bronchopneumonia in all of the above primary conditions.

"Actual quarantine in certain types of cases is optional with the department of public health; also, the quarantine regulation is a modified quarantine, as follows: Modified quarantine will be enforced in all cases of pneumonia, except that under the classification *e* ("all other pneumonias, as traumatic, anesthetic, senile, etc.") may be quarantined at the option of the department of public health. This modified quarantine will consist of placarding, isolation of the patient, prohibition of all visitors, but no restrictions on other members of the household, including school children, provided isolation is complete and instructions from the department of public health are properly carried out. No minimum number of quarantine days specified, the quarantine period being until recovery or death of patient.

"Complete sanitary cleaning of the premises is required before release, but, when this is accomplished thoroughly following the physician's report of recovery, quarantine release is made at once. In a fatal case, after sanitary cleaning, no funeral restrictions are made. Regulations governing pneumococcus carriers or laboratory release regulations were not incorporated. This may be a desirable later step, but at present because of the apparently beneficial effect in reducing the number of cases and deaths from pneumonia and the complete approval accorded the regulation by the physicians, hospitals and citizens of Pittsburgh, the present pneumonia quarantine regulations

have been satisfactory and will continue indefinitely."

Following are the suggestions for the prevention of pneumonia, as issued by the Detroit Department of Health:

While pneumonia is not a definitely preventable disease such as diphtheria or smallpox, many cases may be avoided by carefully observing some rather simple rules. This is the time of the year when pneumonia commences to do its greatest damage. It ordinarily rises very sharply the latter part of December and continues with a high incidence throughout the winter and early spring months. For this reason it would seem wise to call attention to these simple rules at this time.

SUGGESTIONS FOR PNEUMONIA PREVENTION.

1. Dress for the weather. If the temperature changes during the day, be prepared to change your clothing. If it is warm or moderate in the morning take your heavy coat on your arm; you may need it before night.

2. When you go shopping and are going to be inside for some little time, remove your outer wraps.

3. Remember that the baby needs the same changes of clothing to accommodate itself to changes in temperature as the older children or adults.

4. If you get wet, change your clothing immediately. If this is impossible, keep exercising until it is possible to change.

5. If you get a cold, take care of it. If it doesn't improve immediately, see your physician. Colds unattended to are often followed by pneumonia. It is probably safe to say that every year in Detroit at least 500 people lose their lives because of neglected colds.

6. If you should be unfortunate enough to contract pneumonia, see your physician and be sure that adequate nursing is provided.

7. If you are just getting over some other illness, return to your normal routine of life gradually. Remember that even though you feel all right you are still somewhat weakened and pneumonia attacks people who are in such a condition. Pneumonia all too often follows convalescence from some other illness.

8. Remember that babies and very small children suffer greatly from pneumonia and therefore every effort should be made to protect them from colds which other members of the family may have.

The organisms causing pneumonia are widely distributed. Many of us have them in the nose and throat but they do not give us pneumonia when we are in the best of condition. Sudden changes of temperature from hot to cold or from cold to hot, without the necessary changes of clothing which will maintain a constant skin temperature, give the pneumonia organisms the chance they need for attacking us. As a means of timulating the skin to accommodate itself to changes in temperature, a daily bath at first tepid followed by cool water—may prove useful. Colds which are not attended to likewise provide an excellent opportunity for pneumonia to gain a foothold. Lowered resistance from any cause, such as a previous illness, is apt to result in pneumonia unless care is taken not to over exert oneself.

Health Trend Is Ever Upward.

The *Fresno Bee* recently published the following editorial concerning modern health trend:

Medical science has succeeded in prolonging the average expectancy of life from forty to fifty-eight years in the past half century. This does not mean that old people live on the average to be eighteen years older than they did. It means that more people live to be old. And in a large measure it means that more babies grow up. It is on infant mortality that the most telling work has been done.

On the other hand, physicians note an increase, in what are called the degenerative diseases. It appears that many congenitally weak babies are kept alive to maturity, only to die of heart disease, kidney trouble and the like in the forties and early fifties. It has not been shown that the life expectation of those who reach forty is much, if any, longer than it ever was, but only that more people reach the forties and early fifties.

However, it can be shown that the general trend is upward, and that the results already secured have brought about a great social good. For though an alarming number of men die at fifty or less of heart disease, far fewer die at forty or less of tuberculosis. And this means that far fewer children are left without support than formerly. The average is still to the good, even if some of the figures do not mean precisely what they seem to mean at first sight.

San Jacinto Has New Health Officer.

Mr. Buena Anderson has been appointed city health officer of San Jacinto, having assumed the duties of the office December 1, 1926.

Now Is a Good Time to Kill Rats.

Most obnoxious animals have redeeming features of some kind which render their existence less unbearable to man. But the rat is an exception to these and has no redeeming feature. The rat is a highly destructive, filthy, dangerous animal, and an enemy to civilization.

Rats keep up their existence because of their prolific reproduction, their ability to burrow and protect themselves in inaccessible hiding places, and their cunning. They can gnaw their way easily through wood and can even pierce plaster (probably not cement), slate, and lead pipe. Rats are good climbers, good swimmers, and when forced by low food supply, good overland travelers.

Cost. Rats by their destructiveness are a continuous economic drain on the country. A conservative estimate places the cost of supporting a rat at one-half cent per day. With an estimate of a rat population equal to our human population, this means a loss to our country of $180,000,000.00 per year. This estimate, moreover, takes no count of the cost resulting from disease production. Rats have been the agents of transmitting bubonic plague into all parts of the world. According to authoritative records, this disease has in recent centuries destroyed millions of lives. To protect our country against plague, rats are being continuously examined at important ports, thousands of dollars being spent every year.

Destruction and Prevention. To get rid of rats, it is necessary either to kill them or drive them out. Rats can be killed by trapping, poisoning, and by using natural enemies, such as cats and dogs. Rats can be driven out by starvation, and rat proofing of buildings. Rats can seldom be driven out by destructive methods only. Therefore, the value of destructive methods lies in their being used as an adjunct to other methods.

While the value of different patterns of traps cannot be discussed here, it is sufficient to say that the success in trapping depends largely on the attention and diligence of the trapper. No food other than that used as bait should be accessible to rats. Traps should be placed where rats are accustomed to feed. They should be partially concealed with dust, straw, or rubbish. Bait should be chosen which the rats in the particular locality are accustomed to use as foods; for instance, grain in a grain house, meat in a meat market.

The poisons commonly used are arsenious acid or phosphorus (10%), also strychnine and plaster of Paris mixed with flour. Too much confidence can not be placed on poisons. Poisoning is generally regarded as a haphazard and uncertain method and the effectiveness is largely a matter of conjecture. In the setting of rat poisons, of course, due precautions must be taken to prevent accessibility to other animals.

Like poisoning, the destruction of rats by dogs and cats is an uncertain measure. Though certain animals become quite proficient, they can seldom be relied upon to prevent infestation and, in most cases, are of little value.

Rat proofing is regarded as the most effective way of preventing infestation. Without the general enforcement of rat proofing, anti-rat measures are bound to be more or less temporary and decidedly unsatisfactory.—Baltimore Health News.

Diphtheria Down in Contra Costa County.

In his annual report to the Board of Supervisors of his county, Dr. Charles R. Blake, County Health Officer, states that there were but four cases of diphtheria reported in Contra Costa County during the year 1926. During the past three ears Dr. Blake has conducted active campaigns for the immunization against diphtheria and the marked reduction in the prevalence of the disease would indicate that these campaigns are now showing definite results.

MORBIDITY.*

Diphtheria.

178 cases of diphtheria have been reported, as follows: Alameda County 2, Berkeley 2, Oakland 10, Butte County 5, Chico 4, Gridley 2, Oroville 1, Colusa 4, Fresno County 1, Sanger 1, Brawley 1, Kern County 2, Bakersfield 2, Taft 1, Los Angeles County 10, Alhambra 1, Compton 1, El Monte 1, Huntington Park 2, Los Angeles 58, Pasadena 2, San Fernando 1, Lynwood 1, Monterey Park 1, Fort Bragg 1, Grass Valley 2, Orange County 2, Santa Ana 9, Riverside County 2, Banning 1, Riverside 1, Sacramento 5, San Bernardino 2, San Diego County 1, Chula Vista 4, San Diego 4, San Francisco 13, Manteca 1, Stockton 2, San Bruno 1, Santa Clara County 1, Gilroy 1, Sunnyvale 1, Sutter County 1, Tulare County 2, Lindsay 2, Ventura 1, Yuba County 1, Marysville 1.

Scarlet Fever.

220 cases of scarlet fever have been reported, as follows: Albany 2, Berkeley 4, Oakland 10, Chico 1, Pinole 1, El Dorado County 1, Fresno 3, Brawley 1, Kern County 11, Bakersfield 3, Tehachapi 3, Hanford 1, Lemoore 1, Los Angeles County 14, Alhambra 4, Arcadia 1, Beverly Hills 2, El Segundo 1, Glendale 4, Los Angeles 49, Pasadena 5, Pomona 1, Redondo 1, San Fernando 1, San Marino 1, Hawthorne 5, West Covina 1, May-

*From reports received on January 10th and 11th for week ending January 8th.

wood 1, Orange County 1, Fullerton 3, Huntington Beach 2, Orange 1, Santa Ana 4, Lincoln 7, Riverside County 1, Riverside 1, Sacramento 2, San Diego County 1, Chula Vista 1, National City 1, San Diego 19, San Francisco 13, Lodi 3, Paso Robles 5, Burlingame 1, Santa Clara County 3, Gilroy 1, San Jose 3, Sonoma County 1, Healdsburg 2, Stanislaus County 5, Sutter County 1, Tulare County 3, Lindsay 1, Oxnard 1.

Measles.

1115 cases of measles have been reported, as follows: Alameda County 31, Alameda 14, Albany 2, Berkeley 64, Hayward 2, Livermore 2, Oakland 176, Butte County 4, Chico 14, Colusa 2, Contra Costa County 1, Concord 1, El Dorado County 3, Placerville 1, Fresno County 2, Fresno 23, Reedley 1, Orland 1, Bakersfield 2, Lakeport 1, Lassen County 4, Susanville 2, Los Angeles County 34, Burbank 7, El Monte 3, Glendale 4, Los Angeles 89, Montello 3, Pasadena 3, Redondo 1, Sierra Madre 2, Whittier 43, Torrance 1, Madera 3, Marin County 1, Mill Valley 1, Monterey County 1, Salinas 6, Napa 1, Grass Valley 2, Orange County 37, Anaheim 4, Fullerton 14, Huntington Beach 30, Lincoln 1, Riverside County 7, Riverside 4, Sacramento 65, North Sacramento 2, Redlands 4, San Bernardino 32, San Diego County 2, Chula Vista 1, San Diego 40, San Francisco 115, San Joaquin County 26, Lodi 35, Stockton 49, Paso Robles 10, Santa Clara County 6, Gilroy 2, Palo Alto 5, San Jose 5, Sunnyvale 2, Mt. Shasta City 3, Benicia 3, Sonoma County 1, Stanislaus County 3, Modesto 3, Sutter County 2, Yuba City 2, Tehama County 1, Tulare County 1, Tuolumne County 5, Santa Paula 1, Yolo County 24, Woodland 7, Marysville 3.

Smallpox.

20 cases of smallpox have been reported, as follows: Oakland 6, Lassen County 1, Susanville 2, San Diego County 3, Healdsburg 8.

Typhoid Fever.

24 cases of typhoid fever have been reported, as follows: Pittsburg 1, Sanger 15, Madera County 3, Riverside County 1, Escondido 1, San Francisco 1, San Joaquin County 1, California 1.

Whooping Cough.

85 cases of whooping cough have been reported, as follows: Berkeley 15, Oakland 15, Los Angeles County 4, Alhambra 3, Glendale 11, Los Angeles 6, San Gabriel 3, Anaheim 2, Riverside 5, San Diego County 6, San Diego 5, San Francisco 9, Watsonville 1.

Meningitis (Epidemic).

5 cases of epidemic meningitis have been reported, as follows: Pittsburg 1, Los Angeles 1, San Diego 3.

Leprosy.

2 cases of leprosy have been reported, as follows: Berkeley 1, Los Angeles 1.

Poliomyelitis.

2 cases of poliomyelitis have been reported, as follows: Los Angeles 1, San Diego 1.

Encephalitis (Epidemic).

Bakersfield reported one case of epidemic encephalitis.

COMMUNICABLE DISEASE REPORTS.

Disease	1926-1927				1925-1926			
	Week ending			Reports for week ending Jan. 8 received by Jan. 11	Week ending			Reports for week ending Jan. 9 received by Jan. 12
	Dec. 18	Dec. 25	Jan. 1		Dec. 19	Dec. 26	Jan. 2	
Anthrax	0	0	1	0	0	0	0	0
Botulism	0	0	0	0	0	0	1	0
Chickenpox	259	230	262	416	184	155	220	303
Diphtheria	184	156	131	178	136	76	81	83
Dysentery (Bacillary)	1	4	0	1	0	0	3	0
Encephalitis (Epidemic)	0	4	0	1	4	1	5	1
Gonococcus Infection	79	62	94	103	141	43	74	108
Influenza	25	34	36	37	40	101	186	355
Jaundice (Epidemic)	0	0	0	0	0	0	0	0
Leprosy	2	1	1	2	0	0	0	1
Malaria	0	0	1	1	0	1	1	0
Measles	873	596	830	1115	26	14	30	44
Meningitis (Epidemic)	1	5	6	5	7	3	4	4
Mumps	137	57	97	128	124	119	169	286
Paratyphoid Fever	0	0	0	0	1	0	0	1
Pneumonia (Lobar)	51	97	102	109	75	49	138	125
Poliomyelitis	3	0	0	2	7	7	3	1
Rabies (Animal)	6	5	6	6	3	4	6	0
Rabies (Human)	0	0	0	0	0	0	0	0
Rocky Mt. Spotted Fever	0	0	0	0	0	0	0	0
Scarlet Fever	274	252	200	220	147	95	138	165
Smallpox	4	10	8	20	64	62	54	79
Syphilis	101	78	119	264	102	68	87	141
Tetanus	0	1	1	0	2	0	1	1
Trachoma	87	5	7	0	6	0	1	1
Trichinosis	0	0	0	0	0	0	1	0
Tuberculosis	152	124	184	149	160	193	126	166
Typhoid Fever	16	17	13	24	17	14	15	11
Typhus Fever	0	0	0	0	0	0	0	0
Whooping Cough	41	52	53	85	32	36	77	102
Totals	2296	1789	2152	2866	1278	1041	1421	1978

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